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APPLICANTS

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**** CONTINUING DATA *******

This application is a CON of 09/591,757 06/12/2000 PAT 6,739,869
 which is a CON of PCT/IL98/00593 12/07/1998

**** FOREIGN APPLICATIONS *******

ISRAEL 122807 12/30/1997

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
 ** 04/13/2004

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|--|-----------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY ISRAEL | SHEETS DRAWING 9 | TOTAL CLAIMS 18 | INDEPENDENT CLAIMS 5 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | Examiner's Signature | Initials | | |

ADDRESS

20529

TITLE

Virtual orthodontic treatment

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|-----------------------------------|---|---|
| FILING FEE RECEIVED 671 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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